MULTIPLE DEPENDENT CLAIM SERIAL NO. FILING DATE FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) CLAIMS AFTER AS FILED AFTER I AMENDMENT 1 MAMERBMENT AFTER AS FILED AFTER I"ANCHOMENT IND. DEP. IND. 1 AMENDMENT DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. 5 <u>30</u> 35. TOTAL IND A T TOTALEX T P **∳**¤ TOTAL DEP ⇍ TOTAL TOTAL U.S. DEPARTMENT & COMMERCE